

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 29, 2008 8:00 am
Secretary of State

07-29-2008 90010 013 ***150.00

DOCUMENT # P04000028756

1. Entity Name
ROB'S HANDY SERVICE INC.



Principal Place of Business
**2911 WALKER RD.
LAKELAND, FL 33810**

Mailing Address
**2911 WALKER RD.
LAKELAND, FL 33810**



02052008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1223321

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ROB-CYPHERT, L ROLOIS HANDY SERVICE
2911 WALKER ROAD
LAKELAND, FL 33810**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
CYPHERT, ROBERT
2911 WALKER RD.
LAKELAND, FL 33810**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CYPHERT, TEERY
2911 WALKER RD.
LAKELAND, FL 33810**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert M. Cyphert
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ATTACHMENT

40112235

#P04000028756

I am so sorry for just now
sending this in. This was
completed by the accountant
on time but was an oversight
on my part for not sending this
in. I don't think I have
ever been late before in
sending this important document
in. It was the notice
that made me realize this
had not been sent in.

Thank You